



Bib Data Sheet



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SERIAL NUMBER 09/524,942	FILING DATE 03/14/2000 RULE -	CLASS 713	GROUP ART UNIT 2787	ATTORNEY DOCKET NO. 042390.P6357C
APPLICANTS David J. McDonnell, Fair Oaks, CA ; ASndrew M. Volk, Granite Bay, CA ; Michael W. Willims, Citrus Heights, CA ;				
** CONTINUING DATA *****				
** FOREIGN APPLICATIONS *****				
IF REQUIRED, FOREIGN FILING LICENSE GRANTED ** 05/15/2000 -				
Foreign Priority claimed <input type="checkbox"/> yes <input type="checkbox"/> no 35 USC 119 (a-d) conditions met <input type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after Allowance		STATE OR COUNTRY CA	SHEETS DRAWING 18	TOTAL CLAIMS 32
Verified and Acknowledged Examiner's Signature _____ Initials _____		INDEPENDENT CLAIMS 3		
ADDRESS Charles E Shemwell Blakley Sokoloff Taylor & Zafman LLP 12400 Wilshire Boulevard 7th Floor Los Angeles ,CA 90025				
TITLE Cross-clock domain data transfer method and apparatus				
FILING FEE RECEIVED 906	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:		<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of time) <input type="checkbox"/> 1.18 Fees (Issue) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit	

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CONFIRMATION NO. 8992

SERIAL NUMBER 09/524,942	FILING DATE 03/14/2000 RULE	CLASS 713	GROUP ART UNIT 2185	ATTORNEY DOCKET NO. 042390.P6357C
APPLICANTS David J. McDonnell, Fair Oaks, CA; Andrew M. Volk, Granite Bay, CA; Michael W. Williams, Citrus Heights, CA;				
** CONTINUING DATA ***** THIS APPLICATION IS A CON OF 09/186,046 11/03/1998 PAT 6,128,749 <i>OK RIE</i>				
** FOREIGN APPLICATIONS ***** <i>OK RIE</i>				
IF REQUIRED, FOREIGN FILING LICENSE GRANTED ** 05/15/2000				
Foreign Priority claimed <input type="checkbox"/> yes <input checked="" type="checkbox"/> no 35 USC 119 (a-d) conditions met <input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after Allowance <i>RIE</i> Verified and Acknowledged _____ Examiner's Signature Initials		STATE OR COUNTRY CA	SHEETS DRAWING 18	TOTAL CLAIMS 32
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